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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>	<b>Attorney D cket Numb r</b>	AD-9
	<b>First Named Inventor</b>	Davidkhanian, Alex
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	09/803,607
	<b>Filing Date</b>	March 9, 2001
	<b>Group Art Unit</b>	
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**"SLAG DETECTOR FOR MOLTEN STEEL TRANSFER OPERATIONS"**

the specification of which (Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) **March 9, 2001** as United States Application Number or PCT International

Application Number **09/803,607** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0006609.2	United Kingdom	03/17/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

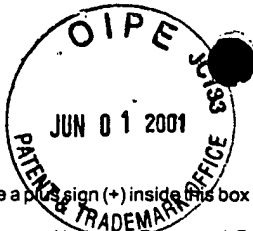
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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PTO/SB/01 (12-97)  
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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
		JUL 02 2001 TC 1700

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 27157

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 27157 OR ☐ Correspondence address below

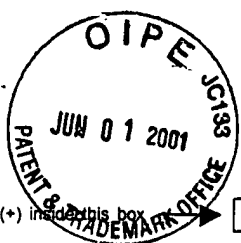
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Address					
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Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname			
Alex		Davidkhanian			
Inventor's Signature <input checked="" type="checkbox"/>				Date <input checked="" type="checkbox"/>	19/04/01
Residence: City	Mississauga	State	Ontario	Country	Canada
Post Office Address	1514 Merrow Road				
Post Office Address					
City	Mississauga	State	Ontario	ZIP	L5J 3C5
				Country	Canada

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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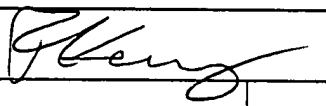
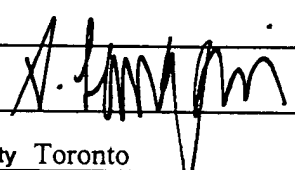
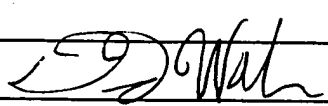
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## DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Frank L.		Kemeny	
Inventor's Signature <input checked="" type="checkbox"/> 		Date <input checked="" type="checkbox"/> April 27, 2001	
Residence: City	Lewiston	State	NY
Country	US	Citizenship	Canada
Mailing Address 4994 Oak Hill Drive			
Mailing Address			
City	Lewiston	State	NY
ZIP	14092	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ali		Langari	
Inventor's Signature <input checked="" type="checkbox"/> 		Date <input checked="" type="checkbox"/> April 23rd, 2001	
Residence: City	Toronto	State	Ontario
Country	Canada	Citizenship	Canada
Mailing Address 47 Thorncliffe Park Drive, Apt. 2517			
Mailing Address			
City	Toronto	State	Ontario
ZIP	M4H 1J5	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
David I.		Walker	
Inventor's Signature <input checked="" type="checkbox"/> 		Date <input checked="" type="checkbox"/> April 26, 2001	
Residence: City	Bolton	State	Ontario
Country	Canada	Citizenship	Canada
Mailing Address 72 Strawberry Hill Court			
Mailing Address			
City	Bolton	State	Ontario
ZIP	L7E 2M4	Country	Canada

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